## N0300000 1206

Office Use Only



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2020 JAN -6 AM 9: 04 SECAL DINGS FOR 1856

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## **COVER LETTER**

TO:

| то:          | Amendment Section Division of Corporations  |  |
|--------------|---|--|
| SUBJ<br>Name | ECT: Valrico Pointe Master Association, Inc. of Corporation                                     |  |
| DOC          | UMENT NUMBER: N03000001206  |  |
|              | nclosed Statement of Change of Registered Offic   | cc/Agent and fee are submitted for filing.   |
|              | e return all correspondence concerning this matter  |  |
| Jackie       | Boyd  |  |
| Name         | of Contact Person   | <del></del>  |
| McNe         | il Management Services, Inc   |  |
| Firm/        | Company   |  |
| PO Bo        | ox 6235   |  |
| Addre        | SSS   |  |
| Brand        | on, FL 33508-6004   |  |
| City/S       | State and Zip Code  |  |
|              | jackie@meneilmsi.com  |  |
| E-ma         | il address: (to be used for future annual repo  | rt notification)   |
| For fu       | rther information concerning this matter, please  | call:  |
| Jackie       | Boyd  | 31 (813 )571-7100 ext 305  |
|              | Name of Contact Person  | at (813 ) 571-7100 ext 305 Area Code & Daytime Telephone Number  |
| Enclo        | sed is a \$35.00 check made payable to the Depar  | rtment of State.   |
|              | Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |

CR2E045 (04/13)

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of cha   | provisions of sections 607.0502, 617.05<br>mge is submitted for a corporation orga<br>r to change its registered office or regis  | mized under the laws of the State of <u>Fl</u>  | orida   |
|--|---|---|---|
| 1. The name of   | the corporation: Valrico Pointe Master As   | ssociation, Inc.  |   |
| 2. The principal   | office address: 1463 Oakfield Dr. Suite 1-  | 42, Brandon, FL 33511   |   |
| 3. The mailing a   | address (if different): PO Box 6235, Bran   | don. FL 33508-6004  |   |
| 4. Date of incor   | poration/qualification: 02/06/2003  | Document number: N0300000   | 1206  |
| 5. The name and  | d street address of the current registered runent of State: (If resigned, enter resign  | agent and registered office on file with  |   |
|  | MEA HOA llc   |   |   |
| 235 W Brandon Blvd #201  |   |   |   |
|  | BRANDON, FL 33511   |   |   |
| .6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |   |   |   |
|  | Mankin Law Group PA   |   | 2020 JAN -6<br>SECRETARD<br>TALL ARRASSA                    |
|  | 2535 Landmark Dr Ste 212  |   | 골   |
| P.O Box NOT acceptable   |   |   | AM 9: 04  |
|  | Clearwater, FL 33761-3930   |   |   |
| The street address changed will  | ess of its registered office and the stree<br>be identical.   | t address of the business office of its   | registered agent,   |
| Such change wanthorized by the   | as authorized by resolution duly adopte<br>the board, or the gorporation has been n   | ed by its board of directors or by an o<br>otified in writing of the change.          | officer so  |
| Signate  | D Nake  | Cara Drake Printed or typed name and title  | <u>e</u>  |
| of my duties, ar<br>document is bei  | the appointment we registered agont as<br>to comply with the provisions of all sta<br>ud I am familiar with and accept the ob<br>ing filed merely to reflect a change in t<br>s been notified in writing of this change | nigation of my position as registered<br>he registered office address. I hereby<br>e. | olete performance<br>agent. Or, if this<br>confirm that the |
| W  | W   | 12/6/19   |   |
| Sug  | mature of Registered Agent  | Date  |   |
|  | chalf of an entity:   |   |   |
| Melisse  | i Mankin  |   |   |
| "  | yped or Printed Name  |   |   |

\* \* \* FILING FEE: \$35.00 \* \* \*